



EASTERN WASHINGTON INTERAGENCY TRAINING ZONE

Training Announcement S-211 – Portable Pumps and Water Use

Nominations due May 18, 2012

Minimum number of students: 15

Maximum number of students: 30

Course Description:

Portable Pumps and Water Use, S-211, is an instructor-led course intended to be presented at the local level. The course consists of three skill areas: supply, delivery, and application of water. Students will be required to demonstrate their knowledge of correct water use, basic hydraulics, and equipment care. The field exercise requires set up, operation, and maintenance of pump equipment. To receive credit for this course, students must have field work observed and approved, and take a closed book written final examination.

Objectives:

- Select equipment required to maintain a flow of water as required by the incident.
- Install pumps, hose lays, and holding tanks to provide water for use during all phases of the incident.
- Perform required field maintenance on a portable pump.

DATES OF CLASSES: June 20-22, 2012

PREREQUISITES: None

TARGET GROUP: Individuals desiring to gain competency in the use of portable pumps and water.

LOCATION: DNR Armory Conference room, 225 South Silke Road, Colville

LEAD INSTRUCTOR: Tim Sampson (509) 738-7716

COURSE COORDINATOR: Tim Sampson (509) 738-7716

Mail, e-mail or FAX registrations to: Tim Sampson
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Kettle Falls WA 99141
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Course Number S-211	Course Name Portable Pumps and Water Use	PRIORITY ____ of ____
IQCS Session Number 00964	Course Location DNR Armory Conference Room, Colville WA	Course Date(s) June 20-22, 2012
Course Tuition (if required)	Course Coordinator Name (First Last) Tim Sampson	Course Coordinator Phone Number 509-738-7716
Course Coordinator E-Mail tsampson@fs.fed.us	Course Coordinator FAX Number 509-738-7780	Date Submitted
Employee's IQCS ID Number:		
Nominee's Name (First MI Last)		
Working Job Title		E-Mail:
Agency Name		Fax:
Home Unit	Nominee's Mailing Address (if different)	
Street	Street	
City	State	City
Zip	Telephone	Zip
List training completed and dates pertinent to this course:		
List your past qualifications pertinent to this course:		
Nominee's Signature: (I will notify the Unit Training Representative if I am unable to attend.)		
Supervisor's Signature (I certify the nominee meets the prerequisites, or if not met I will put the reasons for attending the course in Remarks.)		
Remarks:		